Indiana State Police Clandestine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	9/27/2013	Address:	5748 OakHill Dr	
Incident #:	131SPC009763		Scottburg	
County:	Scott		Indiana 47170	
Type of Laboratory Scizure (check one) Seizure Location (check all that apply)				
☑ Operational Lab☐ Chemical/Glassware/Equipment (only)☐ Dumpsite (only)		Residence Outbuilding Vehicle	☐ Notel/Motel ☑ Open No Structure ☐ Other:	
(check all that	: Location (bedroom, kitchen, open air, o apply) r Birch Reaction(s): <u>Open Air</u>	etc)		
Red Phosphorous/Iodine Reaction(s):				
☐ Hydrochloric Acid Gas Generator(s): Open Air				
☐ Flammable Solvents: Open Air				
Water Reactive Metal (Lithium):				
Anhydrous Ammonia:				
Corrosive Acid:				
Corrosive Base:				
Other (item and location):Coffee Filter,cold pack contents-open air				
Vehicle Information:				
Owner: VIN; Year:	N/A N/A N/A	Make: Model:	N/A N/A	
Child under age 18 discovered (check appropriate) ☐ Yes (number present) ☐ No ☐ Children not present but evidence they reside or visit often		unclean Estimated len occurring:	Estimated length of time manufacturing had been	
This report h	as been faxed* or emailed to the fol	lowing agencies tha	t serve the location:	
Fire Department City, Township or County Scott Co/Finley Fax: 812-752-4410				
Health Department County; Scott Co Fax; 812-752-6023 Department of Child Services Hotline: deshotlinereports@des.in.gov Fax: 317-234-7595 or 317-234-7596				
For further infor	rmation regarding this methamphetam fficer: Mark LaMaster Phone	nine laboratory, conta		

^{*}This form is to be faxed to the Fire Department, Health Department and/or Department of Child Services fisted within 24 hours of scene processing.